

PERMIT NO. _____

Job Site Address			Owner	Mailing	Name	
Description of Work Requested:					Address	
					City Phone #	
Contractor	Name		Architect	Engineer	Name	
	Address				Address	
	City				City	
	Phone # Cell#				State License	
Legal Description			Building Type		5B, Other	
Addition			Occupancy		R-3, Other	
Lot No. Blk.			Flood Plain		Yes No Must Attach Certificate	
Assessor Parcel No:			Planning & Zoning Information			
Comments:			Zone District: R-1, R1M, R-2, R2M, R3, C, CBD, I, B-1, PUD			
			Side Yard Setback : Height:			
Action(s) Requested:			Rear Yard Setback: Area of Lot			
Residential Commercial Garage Addition			Landscape Plan: Yes or No (Attach Plan)			
New Remodel Roof Fence Storage			Storm Drain Plan: Yes or No (Attach Plan)			
Manufactured Home? (See Checklist for Mfd Homes)			Change of Use Information:			
Other?						
Mechanical Permit? Y N						
Mech Permit Type:						
Mech Valuation: \$						
Remarks:						
BUILDING SPECIFICATIONS						
Footing Width: Depth:			Framing Group Size Span Spacing			
FOUNDATION WALLS		EXT. INT.	Girders			
Materials			I- Joists - 1st			
Thickness			I- Joists - 2nd			
Height			Joists			
Piers			Exterior Studs			
Exterior Covering:			Interior Studs			
Interior Wall Covering:			Roof Rafters			
Roofing:			Bearing Walls			
Remarks:			Truss			
			Valuation/Square Footage Information:			
			Owner's Valuation \$			
			Living Floor Area SF			
			Covered Porch SF			
			Garage SF			
			Commercial SF			
			Other SF			
NOTE: If you are located in the West Gunnison Sanitation District "WGSD" (See map in Bldg. Dept.), you must obtain authorization from WGSD, pay for your tap fees separately (payable to WGSD), and provide a receipt that taps were paid, prior to the issuance of your building permit.						
I hereby acknowledge that I have read this application and state that the above is correct and hereby agree to construct, alter, or repair the proposed structure in strict accordance with the codes and ordinances of the City of Gunnison and plans and specifications submitted.						
Date		Applicant Name (Printed)		Applicant Signature		
AGENTS MUST HAVE WRITTEN AUTHORIZATION						
Application:		For Office Use Only, Do not write below this line				
Approved Denied Reason:						
Notes:						
Building Inspector:		Building Permit Total \$			WGSD Receipt Amt: \$	
Date Issued:		Use Tax \$				
Date Paid:		Water & Sewer \$			Valuation \$	

